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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

▼ Declaration Submitted with Initial Filing

□ Declaration Submitted after Initial OR Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		MJS 104				
First Named Inventor		Marvin J. Slepian				
COMPLETE IF KNOWN						
Application Number						
Filing Date Fel		oruary 8, 2002				
Group Art Unit						
Examiner Name						

As a below named inventor, I hereby declare that:							
My residence, mailing address, an	My residence, mailing address, and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
ENDOMURAL THERAPY							
	(7	Title of the Invention)					
the specification of which							
is attached hereto							
OR		as United S	States Application I	Number or PCT International			
☐ was filed on (MM/DD/YYYY)				(if applicable).			
Application Number	and was a	mended on (MM/DD/Y)	m	(**************************************			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
			0000				
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s) Filing Date (MM/DD/YYYY)							
50/267,578 2/9/01			Additional provisional appured in the control of th				

[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

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Name	Name Patrea L. Pabst						
Address	ddress Holland & Knight LLP						
Address	Suite 2000, One Atlantic Center; 1201 West Peachtree Street, N.E.						E.
City	Atlanta			State	GA	ZIP 30309-3400	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF	NAME OF SOLE OR FIRST INVENTOR:						led for this unsigned inventor
			Family Name Slepian or Surname				
Inventor's Signature Date					Date		
Residence: City Tucson AZ State				USA Country Citizenship US			
Mailing Address 5001 North Summit Ridge Road							
Mailing Addre	ess						
City Tucso	n	State AZ		ZIP 85750		Country USA	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
				-	Family Name or Surname		
Inventor's							
Signature				Ţ			Date
Residence: C	ity	<u></u>		State		Country	Citizenship
Mailing Address							
Mailing Address							
City	-	State			ZIP		Country
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							